

STATE OF ALABAMA
DEPARTMENT OF INDUSTRIAL RELATIONS
UNEMPLOYMENT COMPENSATION AGENCY
MONTGOMERY, ALABAMA 36131

EMPLOYER WAGE REPORT FOR QUALIFYING PERIOD
PAYMENTS PENDING FINAL APPROVAL OF CLAIM

ERIKA L ROLLINS
523 33RD AVE
TUSCALOOSA

AL 35401

DATE 07/14/08 PAGE 1
SSN XXX-XX-2510
CLAIM DATE 07/06/08
6002

BASE PERIOD WAGES

EMPLOYER	APR-JUN 07	JUL-SEP 07	OCT-DEC 07	JAN-MAR 08	EMP-TOT
SOUTHEAST AP 00-225551-00 SIC6531	WIL 6,074.45	WIL 6,046.04	WIL 7,593.10	WIL 6,383.39	26,096.98
WC DIXON TIR 00-288556-56 SIC0000	WIL 3,903.30	.00	.00	.00	3,903.30

QUARTER TOTALS	9,977.75	6,046.04	7,593.10	6,383.39	30,000.28
					=====
					TOTAL WAGES

WEEKLY BENEFIT AMOUNT - 255.00 MAXIMUM BENEFIT AMOUNT - 6,630.00

MESSAGE THE WEEKLY CERTIFICATION PROCESS CAN NOW BE COMPLETED
ONLINE AT DIR.ALABAMA.GOV. THERE, CLICK ON 'UNEMPLOYED
WORKERS' AND FOLLOW THE ONSCREEN INSTRUCTIONS TO
CONVENIENTLY COMPLETE YOUR WEEKLY REPORTING REQUIREMENT.

AVERAGE OF TWO HIGH QUARTERS = \$ 8,785.42 MAILED 07/14/08
REDET DATE 00/00/00 REDET CODE 0

REVIEW CAREFULLY TO ENSURE ALL EMPLOYERS FOR WHICH YOU WORKED DURING THE
INDICATED PERIOD ARE LISTED AND CONFIRM THAT THE WAGES ARE CORRECT. IF THERE
ARE ANY ERRORS, CALL THE INQUIRY LINE AT 800-361-4524. FOR FURTHER EXPLANATION
OF THIS STATEMENT & APPEAL RIGHTS SEE YOUR 'BENEFIT RIGHTS AND RESPONSIBILITIES'
BOOKLET. DO NOT DISCARD THIS FORM AS THERE IS A CHARGE FOR ADDITIONAL COPIES.